## PART B - FEE(S) TRANSMITTAL

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INSTRUCTIONS: This appropriate. All furthers indicated the property and indicated maintenance fee notification	rm should be used prespondence including below or directed or ons.	ng the Patent, advance herwise in Block 1, by	orders and notification of (a) specifying a new cor	TION FEE (if requestion from the second from t	nired). Blocks I through a will be mailed to the curron; and/or (b) indicating a s	should be completed when ant correspondence address a eparate "FEE ADDRESS" fo	
058403 7 BARRY W. CH. CHAPIN INTELL WESTBOROUGH 1700 WEST PARI	lock I for any change of address	, F p: h:	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.  Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.				
WESTBOROUGE 12/07/2006 EFLORES1 000	-			(Depositor's name) (Signature)			
01 FC:1501 1400.00 OP						(Date)	
09/667,648	APPLICATION NO. FILING DATE		FIRST NAMED INVEN		ATTORNEY DOCKET NO.	CONFIRMATION NO.	
TITLE OF INVENTION: SYSTEM FOR DISTRIBUTED ERROR REPORTING AND USER INTERACTION  1958.2006-000 1149							
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE	- FDD   TO		
nonprovisional	NO	\$1400	\$0	\$0			
EXAMINER		ART UNIT	CLASS-SUBCLASS	י	\$1400	12/12/2006	
BARQADLE, Y	2153	709-218000	J				
1. Change of correspondence CFR 1.363).  Change of correspond Address form PTO/SB/12  "Fee Address" indicate PTO/SB/47; Rev 03-02 o Number is required.	ence address (or Chan (2) attached. ion (or "Fee Address" r more recent) attache	ge of Correspondence Indication form d. Use of a Customer	(1) the names of up to or agents OR, alternate (2) the name of a sing registered attorney or 2 registered patent atto listed, no name will be	2. For printing on the patent front page, list  (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.  Chapin IP Law, LLC  Barry W. Chapin, Esq.			
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)  PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.  (A) NAME OF ASSIGNEE  (B) RESIDENCE: (CITY and STATE OR COUNTRY)  Oracle International Corporation  Redwood Shores, CA							
Please check the appropriate assignee category or categories (will not be printed on the patent):							
4a. The following fee(s) are submitted:  I Issue Fee  Publication Fee (No small entity discount permitted)  Advance Order - # of Copies  The Director is hereby authorized to charge the required fee(s), any deficiency, or credit and overpayment, to Deposit Account Number Co. 2015.						shown above)	
De Amiliant I i Deste I i Deste I i Deste I i i i i i i i i i i i i i i i i i i							
NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.							
Authorized Signature / WWW. WWW. December 4, 2006							
Typed or printed nameBar	n, Esq.	39,934					
This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450. Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.							
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ATTORNEY DOCKET NO.: OID06-32(04801)

STATES PATENT AND TRADEMARK OFFICE

Applicants: Paul F. Mackin, David E. Rowlands, Luk S. Ho, Robert C. Donat and

Chung Y. Cheng

DEC 0 4 2006

09/667,648 Serial No.:

Title: SYSTEM FOR DISTRIBUTED ERROR REPORTING AND USER

INTERACTION

Filing Date: September 22, 2000 Yasin M. Barqadle Examiner:

Art Unit: 2153 Conf. No.: 1149

## Certificate of Express Mail Under 37 C.F.R. §1.10

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as Express Mail in an envelope addressed to: MAIL STOP ISSUE FEE, Commissioner for Patents, PO Box 1450, Alexandria. Virginia 22313-1450 on:

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By: Farah Z. Frasco

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## TRANSMITTAL LETTER

Sir:

Enclosed is/are:

\* U.S. Application No.: 09/667,648 Attorney Docket No.: OID06-32(4801)

-2-

- [x] Transmittal Letter (this form, 2 pages, in duplicate), Total Pages: 4;
- [x] Part B Issue Fee Transmittal (1 page, in duplicate), Total Pages: 2;
- [x] Return Receipt Pre-paid Postcard (in duplicate), Total Postcards: 2;
- [x] Authorization to charge Deposit Account No. 50-3735;
- [x] Check in the amount of \$1,400.00 to cover Issue Fee.

Applicant hereby petitions for any extension of time which is required to maintain the pendency of this case. If there is a fee occasioned by this response, including an extension fee, that is not covered by an enclosed check, please charge any deficiency to Deposit Account No. <u>50-3735</u>.

If the enclosed papers or fees are considered incomplete, the Mail Room and/or the Application Branch is respectfully requested to contact the undersigned collect at (508) 616-9660, in Westborough, Massachusetts.

Respectfully submitted,

Barry W. Chapin, Esq. Attorney for Applicants

Registration No.: 39,934

Thur Cons

Chapin Intellectual Property Law, LLC

Westborough Office Park 1700 West Park Drive

Westborough, Massachusetts 01581

Telephone: (508) 616-9660 Facsimile: (508) 616-9661

Attorney Docket No.: OID06-32(4801)

Dated: December 4, 2006